Case 20-13688-amc Doc 14 Filed 09/22/20 Entered 09/22/20 11:42:23 Desc Main Document Page 1 of 30

Debtor 1	Tiffany	Α.	Bello	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for t	the: Eastern District of Po	ennsylvania	

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages write your name and case number (if known). Answer every question.

			ve an Interest In		
		est in any residence, building, land, or similar prop	perty?		
	o. Go to Part 2.				
Z Y	es. Where is the property?				
1.1.	69 West Amosland Road Street address, if available, or other description	What is the property? Check all that apply. ✓ Single-family home Duplex or multi-unit building	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	ed claims on Schedule D	
	en est address, il available, or other description	Condominium or cooperative	Current value of the	Current value of the	
		Manufactured or mobile home	entire property?	portion you own?	
		Land	\$ 196,280.00	s 196,280.00	
	Norwood PA 19074	☐ Investment property		T	
	City State ZIP Code	- Timeshare	Describe the nature of your owners		
		Other	interest (such as fee the entireties, or a life	simple, tenancy by	
		Who has an interest in the property? Check one.		COLOR SOCIAMINA COLOR FOR COLOR COLOR SOCIAMINA COLOR	
	Delaware	Debtor 1 only	tenancy by the en	tireties	
	County	Debtor 2 only			
		Debtor 1 and Debtor 2 only	Check if this is co	mmunity property	
		At least one of the debtors and another	(see instructions)		
		Other information you wish to add about this it	tem, such as local		
		Other information you wish to add about this it property identification number:	tem, such as local		
you	own or have more than one, list here:	Other information you wish to add about this it property identification number:	tem, such as local		
you	own or have more than one, list here:	Other information you wish to add about this it property identification number: What is the property? Check all that apply.			
	own or have more than one, list here:	property identification number:	Do not deduct secured cla	d claims on Schedule D:	
		property identification number: What is the property? Check all that apply.		d claims on Schedule D:	
	own or have more than one, list here: Street address, if available, or other description	what is the property? Check all that apply. Single-family home	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.	
		what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured cla	d claims on Schedule D: ns Secured by Property.	
		what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured clathe amount of any secured Creditors Who Have Claim	d claims on Schedule D: ns Secured by Property. Current value of th	
		what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule Dans Secured by Property. Current value of the portion you own?	
		what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of	d claims on Schedule Dins Secured by Property. Current value of the portion you own? \$	
	Street address, if available, or other description	what is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee secured)	d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$ If your ownership simple, tenancy by	
	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of	d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$ If your ownership simple, tenancy by	
	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee secured)	d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$ If your ownership simple, tenancy by	
	Street address, if available, or other description City State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee secured)	d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$ If your ownership simple, tenancy by	
	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$ If your ownership simple, tenancy by e estate), if known.	
	Street address, if available, or other description City State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? \$ Describe the nature of interest (such as fee secured)	d claims on Schedule D: ns Secured by Property. Current value of th portion you own? \$ If your ownership simple, tenancy by e estate), if known.	
you 1.2.	Street address, if available, or other description City State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule Das Secured by Property. Current value of the portion you own? \$	

Case 20-13688-amc Doc 14 Filed 09/22/20 Entered 09/22/20 11:42:23 Page 2 of 30 Document Tiffany Debtor 1 Bello Case number (if known) 20-13688-amc What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ■ Single-family home the amount of any secured claims on Schedule D: 1.3. Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Condominium or cooperative Current value of the entire property? portion you own? Manufactured or mobile home ☐ Land ■ Investment property City ZIP Code Describe the nature of your ownership Timeshare interest (such as fee simple, tenancy by Other | the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 196,280.00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Buick Who has an interest in the property? Check one. 3.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Verano Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2016 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only 50,000 Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 13,500.00 13,500.00 Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? Approximate mileage: portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions)

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Tiffany A. Bello Case number (if known), 20-13688-amc

	Model: Year:		Do not deduct secured cla	aims or exemptions. Put
	Year:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
		Debtor 2 only	Creditors with Have Clair	ins secured by Property.
		Debtor 1 and Debtor 2 only	Current value of the	Current value of th
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:			•
		☐ Check if this is community property (see instructions)	\$	\$
1.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	aims or exemptions. But
	Model:	Debtor 1 only	the amount of any secure	d claims on Schedule D:
		Debtor 2 only	Creditors Who Have Clair	ms Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:			
		☐ Check if this is community property (see instructions)	\$	\$
	Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property?	d claims on Schedule D: ns Secured by Property.
	Model:	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	the amount of any securer Creditors Who Have Claim Current value of the	d claims on Schedule D: ns Secured by Property. Current value of the
ou o	Model: Year: Other information: own or have more than one, list here:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
ou (Model: Year: Other information: own or have more than one, list here: Make:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one.	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
ou (Model: Year: Other information: own or have more than one, list here:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
70u (Model: Year: Other information: own or have more than one, list here: Make:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$
ou (Model: Year: Other information: own or have more than one, list here: Make: Model:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only	the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured Creditors Who Have Claim	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$

Debtor 1

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Debtor 1

Tiffany

Case number (if known) 20-13688-amc

Part 3: **Describe Your Personal and Household Items**

Do	you own or have any l	egal or equitable interest in any of the following items?	Current value portion you Do not deduct or exemptions	own? secured claims
6.	Household goods and	furnishings		
		nces, furniture, linens, china, kitchenware		
	□ No			
	Yes. Describe	Major appliances	\$	100.00
7	Electronics		······································	
•	Examples: Televisions a collections; e	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games		
	☐ No		anananang	
	Yes. Describe	Televisions	\$	100.00
8.	Collectibles of value		www.commerce.com	
		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
	Yes. Describe		\$	***************************************
•	F			
9.		ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments		
	☑ No			
	Yes. Describe		\$	
10	Firearms		-	
10.		shotguns, ammunition, and related equipment		
	Yes. Describe		\$	
11	Clothes			
		thes, furs, leather coats, designer wear, shoes, accessories		
	Yes. Describe	Everyday clothes	\$	100.00
12.	Jewelry Examples: Everyday jev	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	······································	
	☑ No			
	Yes. Describe	•	\$	
13.	Non-farm animals		and the second second	
	Examples: Dogs, cats, b	irds, horses		
	☑ No	- Control Cont		
	Yes. Describe		\$	
14.	Any other personal and	household items you did not already list, including any health aids you did not list	TO SHE	
	☑ No			
	Yes. Give specific information		\$	
15.		all of your entries from Part 3, including any entries for pages you have attached	\$	300.00
	ior Part 3. Write that no	umber here		

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Debtor 1

Tiffany

Part 4:

Describe Your Financial Assets

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Do you own o	or have any legal or equitable interest in any of the following?	Current value of portion you ow Do not deduct sec or exemptions.	m?
16. Cash Examples:	Money you have in your wallet, in your home, in a safe deposit box, and on hand when you	file your petition	
☐ No			
Yes		Cash: \$	100.00
	of money Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions and other similar institutions. If you have multiple accounts with the same institution, list eac	s, brokerage houses, h.	
No Yes	Institution name:		
	*		
	17.1. Checking account:	\$	100.00
	17.2. Checking account:		
	17.3. Savings account:	T	
	17.4. Savings account:	Ψ	
	17.5. Certificates of deposit:	¥	
	17.6. Other financial account:	Ψ	
	17.7. Other financial account:	Ψ	
	17.8. Other financial account:	Ψ	
	17.9. Other financial account:	\$	
	tual funds, or publicly traded stocks Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name:		
		\$	
		\$	
		\$	
19. Non-public an LLC, pa	ly traded stock and interests in incorporated and unincorporated businesses, includir rtnership, and joint venture	ng an interest in	
☑ No	Name of entity:	% of ownership:	
Yes. Giv	re specific ion about	0%	
		0% % \$	
		0%	

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Page 7 of 30 Document Case number (if known) 20-13688-amc Bello Tiffany Debtor 1 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No No ☐ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses V No ☐ Yes. Give specific information about them.... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No No ☐ Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No No Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation,

Social Security benefits; unpaid loans you made to someone else

No No

☐ Yes. Give specific information.....

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Tiffany Debtor 1

First Name

Case number (if known) 20-13688-amc

31. Interests in insurance policies			
	nce: health savings account (H	SA); credit, homeowner's, or renter's insurance	
☑ No	ioo, noam oavingo account (i i	on, credit, nomeowners, or renters insurance	
E CONTRACTOR			
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
or oddin policy and list its value			_
			\$
			\$
			\$
32. Any interest in property that is due you	from someone who has died	I	
If you are the beneficiary of a living trust, e	expect proceeds from a life insi	rance policy, or are currently entitled to receive	
property because someone has died.			
☑ No			
Yes. Give specific information			
			\$
33. Claims against third parties, whether or	not you have filed a levelit	au made a demand for more	observant.
Examples: Accidents, employment dispute:	s insurance claims or rights t	or made a demand for payment	
☑ No	o, mourance dialitie, or rights t	Joue	
Yes. Describe each claim			
Tes. Describe each daim.			\$
24 Other contingent and unliquidated all-in-			Ψ
34. Other contingent and unliquidated claim to set off claims	is of every nature, including	counterclaims of the debtor and rights	
☑ No			
Yes. Describe each claim			
			\$
35. Any financial assets you did not already	list		
☑ No			
Yes. Give specific information			\$
-			3
36. Add the dollar value of all of your entries	from Bort 4 including one		
for Part 4. Write that number here	s from Fart 4, including any	entries for pages you have attached	117,200.00
		7	3
The second secon			The second secon
Part 5: Describe Any Business-R	Related Property You (Own or Have an Interest In. List any r	eal estate in Part 1.
37. Do you own or have any legal or equitable	le interest in any business-re	elated property?	
No. Go to Part 6.			
Yes. Go to line 38.			
			Current value of the
			portion you own?
			Do not deduct secured claims
			or exemptions.
38. Accounts receivable or commissions you	u already earned		
□ No			
Yes. Describe		100000000000000000000000000000000000000	
			\$
39. Office equipment, furnishings, and supp			
		chines, rugs, telephones, desks, chairs, electronic devices	
☐ No			
Yes. Describe			
			\$

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Debtor 1	Tiffany		Α.	Bello	Case number (#	known) 20-13688-8	amc
	First Name	Middle Name	Last Name				
40 Machine	ame fixtures of						
	ery, fixtures, e	equipment, su	ppiles you use	in business, and t	ools of your trade		
☐ No	. Describe		Protection for the Control of the Advantage on the Advantage of the Advant				
i res.	. Describe						\$
						P2000 34 at 12	many suf
41. Invento	ry						
☐ No	. Describe						- Constitution of the Cons
wall ICS.	. Describe						\$
10 1-11			nana di Persana ang ang				
42. Interests	s in partnersn	ips or joint ve	ntures				
	Describe	Name of entity				200 / W 0000	
		Name of entity				% of ownership:	
						%	\$
						%	\$
					And the second s	%	Ψ
	er lists, mailir	ng lists, or oth	er compilations	:			
☐ No	Do your lists	inalisala mana		la !afa	defined in 11 U.S.C. § 101(41A		
— 165.	No No	monute perso	many identinat	ie information (as	defined in 11 U.S.C. § 101(41A))?	
	Yes. Desc	ribe					
							\$
(4 Amu hua			4:4 - 4 - 1 1	P-4			
P4. Any bus	iness-related	property you	did not already	list			
Yes.	Give specific						•
infor	mation	»			- Andrews and the second secon		\$
					29.50-31 - 2 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3		\$
		5			William Control of Con		\$
							\$
					The second secon		\$
							\$
5. Add the	dollar value	of all of your e	ntries from Par	t 5, including any	entries for pages you have att	ached	\$ 0.00
for Part	5. Write that I	number here				→	\$

Part 6:	If you own or	n y Farm- an d have an inter	I Commercial est in farmland	Fishing-Related, list it in Part 1.	d Property You Own or Ha	ve an Interest I	n.
50.02		ny legal or eq	uitable interest	in any farm- or co	mmercial fishing-related prop	erty?	
	Go to Part 7. Go to line 47.						
Tes.	GO to line 47.						
							Current value of the portion you own?
							Do not deduct secured claims
7. Farm an	imals						or exemptions.
Example	s: Livestock, p	oultry, farm-rai	sed fish				
☐ No							
☐ Yes							
							\$
	L			CANCEL CONTRACTOR AND ADDRESS OF THE CANCEL CONT			

Case number (if known) 20-13688-amc Tiffany Debtor 1 48. Crops-either growing or harvested ☐ No ☐ Yes. Give specific information.... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ No ☐ Yes 50. Farm and fishing supplies, chemicals, and feed ☐ No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☐ No ☐ Yes. Give specific information.... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. ☐ Yes. Give specific information..... 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here List the Totals of Each Part of this Form Part 8: 196,280.00 55. Part 1: Total real estate, line 2 13,500.00 56. Part 2: Total vehicles, line 5 300.00 57. Part 3: Total personal and household items, line 15 117,200.00 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 131,000.00 Copy personal property total 131,000.00 62. Total personal property. Add lines 56 through 61. 327,000.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.

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Desc Main

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Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	☐ You are clai	kemptions are you claiming? iming state and federal nonban iming federal exemptions. 11 U	kruptcy exemptions. 11	A THE PROPERTY OF THE PROPERTY	
2.	For any proper	ty you list on Schedule A/B th	nat you claim as exem	pt, fill in the information below.	
	Brief description	on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description: Line from Schedule A/B:	69 W. Amosland Rd.	\$ <u>196,280.00</u>	 ∑ \$ 23,675.00 □ 100% of fair market value, up to any applicable statutory limit 	11 U.S.C. sec. 522(d)(1)
	Brief description: Line from Schedule A/B:	2016 Buick Verano	\$ 13,500.00	 ✓ \$ 4,000.00 100% of fair market value, up to any applicable statutory limit 	11 U.S.C. sec. 522(d)(2)
	Brief description: Line from Schedule A/B:	2016 Buick Verano	<u>\$ 135,000.00</u>	 ■ \$ 9,500.00 ■ 100% of fair market value, up to any applicable statutory limit 	11 U.S.C. sec. 522(d)(5)
3.	(Subject to adjust No		years after that for case	s filed on or after the date of adjustment.) 1,215 days before you filed this case?	

Document Page 12 of 30

Debtor 1

Tiffany

Part 2:

Case number (if known) 20-13688-amc

Additional Page

Brief descripti on Schedule A	f description of the property and line Current value of the portion you own		Amount of the exemption you claim		Specific laws that allow exemption	
		Copy th Schedu	ne value from ule A/B	Check or	nly one box for each exemption	
Brief description:	Major appliances	\$	100.00	4 \$_	100.00	11 U.S.C. sec. 522 (d)(3)
Line from Schedule A/B:					6 of fair market value, up to applicable statutory limit	
Brief description:	Televisions	\$	100.00	\$	100.00 6 of fair market value, up to	11 U.S.C. sec. 522(d)(3)
Line from Schedule A/B:					applicable statutory limit	
Brief description:	Everyday clothes	\$	100.00	4 \$_		11 U.S.C. sec. 522(d)(3)
Line from Schedule A/B:					6 of fair market value, up to applicable statutory limit	
Brief description:	Profit Sharing Plan	\$	117,000.00		17,000.00	11 U.S.C. sec. 522(d)(12)
Line from Schedule A/B:					6 of fair market value, up to applicable statutory limit	
Brief description:		\$	·			
Line from Schedule A/B:				any	applicable statutory limit	~~~
Brief description:		\$				
Line from Schedule A/B:					6 of fair market value, up to applicable statutory limit	
Brief description:		\$				
Line from Schedule A/B:					of fair market value, up to applicable statutory limit	
Brief description:		\$			of fair market value, up to	
Line from Schedule A/B:	· Comments				applicable statutory limit	
Brief description:		\$	Karas Andrews Comments	- \$_		
Line from Schedule A/B:	-				of fair market value, up to applicable statutory limit	
Brief description:	·	\$		- \$_		
Line from Schedule A/B:					of fair market value, up to applicable statutory limit	(2000)
Brief description:	Manual Visit of the Control of the C	\$		\$_		
Line from Schedule A/B:					of fair market value, up to applicable statutory limit	
Brief description:		\$		□ \$		
Line from Schedule A/B:					of fair market value, up to applicable statutory limit	

riii in this in	formation to ide	ntify your case:		
Debtor 1	Tiffany	A.	Bello	11 23241111112
<i>10</i> -	First Name	Middle Name	Last Name	
Debtor 2	22.00			
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for	the: Eastern District of P	ennsylvania	
Case number	20-13688-am	nc		

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

Part 1: List All Secured Claims				
List all secured claims. If a creditor has r for each claim. If more than one creditor has much as possible, list the claims in alplant.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
Metlife Insurance Co. USA	Describe the property that secures the claim:	\$201,183.11	\$196,280.00	4,903.11
4425 Ponce de Leon Blvd.	69 West Amosland Road Norwood, PA 19074			
Coral Gables FL 33146 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
2.2	Describe the property that secures the claim:	\$	\$ \$	Parriament of the State of Sta
Creditor's Name		7	Ψ9	
Number Street				
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in C	column A on this page. Write that number here:	\$201,183.11		

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Document Page 14 of 30 Tiffany Bello Case number (if known) 20-13688-amc Debtor 1 First Nan Column A **Additional Page** Column R Column C Part 1: Amount of claim Value of collateral Unsecured After listing any entries on this page, number them beginning with 2.3, followed that supports this Do not deduct the portion by 2.4, and so forth. value of collateral. claim If any Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred _ Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number_ Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent 7IP Code Unliquidated State Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) _ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number _

Write that number here:

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

201,183.11

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Debtor 1

Tiffany
A.
Bello
First Name
Middle Name
Last Name

Document
Page 15 of 30

Case number (if known) 20-13688-amc

you have me	ying to conect from you for a debt	tified about you you owe to som	r bankruptcy for a d	lebt that you already listed in Part 1. For example, if a collection reditor in Part 1, and then list the collection agency here. Similarly, if the additional creditors here. If you do not have additional persons to
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
Section and the section of the section and		Market SPL Harrist Township (1998)		On which line in Part 1 did you enter the creditor?
Name		**************************************	The second secon	Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
SEASON DESIGNATION OF THE SEASON OF THE SEAS		A STANSON OF THE PARTY OF THE P		On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
THE CHARLES CALLED THE SAME TH	THE CAMBER OF THE STATE OF THE	CONTROL PORTO TO SERVICE CONTROL CONTR		On which line in Part 1 did you enter the creditor?
Name		***************************************		Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
SERVICE CONTRACTOR CON				On which line in Part 1 did you enter the creditor?
Name			No.	Last 4 digits of account number
Number	Street			
City		State 2	ZIP Code	
ATRA PERSONAL CONTRACT CONTRACT PROPERTY.	alikur yazi pinatrokulurako uris esiki zaolerizare tariturkut erenmentaziotatako kanaretu e terreturokazi	PT YOU SEERING THE SOURCE HEAPTH SET YOU PEAK THE RESERVE HOUSE		On which line in Part 1 did you enter the creditor?
Name	40.10			Last 4 digits of account number
Number	Street			
0.1				
City	S	State 2	ZIP Code	

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Debtor 1	Tiffany	A.	Bello
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court for the	Eastern District of P	Pennsylvania
Case number	20-13688-amc		
(If known)			

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

any additional pages, write your name and case in				
Part 1: List All of Your PRIORITY Unsecu				
Do any creditors have priority unsecured claim	ns against you?			
No. Go to Part 2.				
Yes.				
each claim listed, identify what type of claim it is. I nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page or	reditor has more than one priority unsecured claim, list to f a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's not part 1. If more than one creditor holds a particular claim	at claim here a	nd show both	priority and
(For an explanation of each type of claim, see the	instructions for this form in the instruction booklet.)			
		Total claim	Priority	Nonpriority
			amount	amount
2.1	Last 4 digits of account number	\$	•	\$
Priority Creditor's Name	Last 4 digits of account number	Ψ	_ Ψ	_ \$
	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply	,		
	☐ Contingent	16. -		
City State ZIP Code	☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	- Disputed			
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
Is the claim subject to offset?	Other. Specify			
Yes	Other. Specify			
Tess 2		The same and the s		
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
, nemy orositor o Hamis	When was the debt incurred?		MATE. 16	
Number Street				
Secretaria de la companio del companio de la companio del companio de la companio della companio de la companio della companio	As of the date you file, the claim is: Check all that apply			
	Contingent			
City State ZIP Code	☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only				
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
lacksquare Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
Is the claim subject to offset? ☐ No	Other. Specify			
Yes				

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Debtor 1

Tiffany

Your PRIORITY Unsecured Claims — Continuation Page Part 1: After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim **Priority** Nonpriority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent City State ZIP Code ☐ Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ☐ No ☐ Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ☐ No ☐ Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ☐ No ☐ Yes

Case 20-13688-amc Doc 14 Filed 09/22/20 Entered 09/22/20 11:42:23 Document Page 18 of 30 Case number (if known) 20-13688-amc Debtor 1 Part 2: **List All of Your NONPRIORITY Unsecured Claims** 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Enhanced Recovery Company, LLC Last 4 digits of account number Nonpriority Creditor's Name 485.00 8014 Bayberry Road When was the debt incurred? Jacksonville 32256 As of the date you file, the claim is: Check all that apply. ZIP Code Contingent Who incurred the debt? Check one Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts No No Other. Specify Consumer debt Yes Aargon Agency, Inc. 166.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 8668 Spring Mountain Road #110 Number As of the date you file, the claim is: Check all that apply. Las Vegas 89117 ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify Utility bill No. Yes Nemours Alfred I. duPont Hospital for Children Last 4 digits of account number Nonpriority Creditor's Name 16,882.74 When was the debt incurred? 1600 Rockland Road Number Wilmington DE 19803 As of the date you file, the claim is: Check all that apply. State ZIP Code Contingent Who incurred the debt? Check one. ☐ Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts M No Other. Specify medical bill ☐ Yes

Debtor 1

Tiffany	
illially	

-	 2	

First Name Middle Name

Part 2:	Your NONPRIORITY	Unsecured	Claims — Continuation	Page
---------	------------------	------------------	-----------------------	------

The listing any entries on t	his page, number them beginning wit	th 4.4, followed by 4.5, and so forth.	Total claim
Taylor Hospital		Last 4 digits of account number	s 450.00
Nonpriority Creditor's Name 175 East Chester Pi	ike	When was the debt incurred?	•
Number Street Ridley Park	PA 19078	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? C	State ZIP Code	Contingent Unliquidated Disputed	
Debtor 2 only Debtor 1 and Debtor 2 or		Type of NONPRIORITY unsecured claim:	
At least one of the debtor	nly rs and another	☐ Student loans	
☐ Check if this claim is to Is the claim subject to off ✓ No ☐ Yes		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical bill 	
Associates in Anesth	nesia	Last 4 digits of account number	s 83.80
Nonpriority Creditor's Name		When was the debt incurred?	ψ
175 East Chester Pil	ke	- When was the dept incurred?	
Ridley Park	PA 19078	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
Who incurred the debt? C	heck one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only		□ Disputed	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 onl At least one of the debtors		☐ Student loans	
		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is fo		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offs	set?	✓ Other Specify medical bill	
☑ No ☐ Yes			
AND THE CASE OF THE STATE OF TH	distinction records and grant in the trough place record in the grant distinct and an extensive and are a record and a rec	Last 4 digits of account number	\$
Nonpriority Creditor's Name		When was the debt incurred?	
Number Street			
City	State ZIP Code	As of the date you file, the claim is: Check all that apply.	
Oily	State ZIP Code	☐ Contingent☐ Unliquidated	
Who incurred the debt? Ch	neck one.	Disputed	
Debtor 1 only			
Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
At least one of the debtors		Student loans	
☐ Check if this claim is fo		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset No Yes	et?	Other. Specify	

Debtor 1

Tiffany First Name

Part 3:	List Others	to Be	Notified	About a	Debt	That	You	Aiready	Listed
---------	--------------------	-------	----------	---------	------	------	-----	---------	--------

			•	ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name	400 y		***************************************	On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	
Name		and the second second		On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
Silio				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			☐ Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
ity		State	ZIP Code	
lame	(**			On which entry in Part 1 or Part 2 did you list the original creditor?
lumber	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
ity	PINTEROLOGICA PER	State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
lame		*** ***********************************		
umber	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
				Claims Part 2: Creditors with Nonpriority Unsecured
City	· · · · · · · · · · · · · · · · · · ·	State	ZIP Code	Last 4 digits of account number
lame				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber	Street			Part 2: Creditors with Nonpriority Unsecured
	·			Claims
ity		State	ZIP Code	Last 4 digits of account number

Debtor 1

18,067.54

Part 4:

Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
 Add the amounts for each type of unsecured claim.

8		
		Total claim
Total claims	6a. Domestic support obligations	6a. \$
from Part 1	6b. Taxes and certain other debts you owe the government	6b. \$
	6c. Claims for death or personal injury while you were intoxicated	6c. _{\$}
	 Other. Add all other priority unsecured claims. Write that amount here. 	6d. + _{\$}
	6e. Total. Add lines 6a through 6d.	6e. \$0.00
		Total claim
Total claims	6f. Student loans	6f.
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. _{\$}
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + _{\$} 18,067.54
	6j. Total. Add lines 6f through 6i.	6i.

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Debtor	Tiffany	A.	Bello
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse If filing)	First Name	Middle Name	Last Name
rente mes c	Contractor Court for	the: Eastern District of Pe	ennevlvania
United States I	bankrupicy Court for	tile. Lastern District Of F	o inio yivania

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	or company wi	th whom you	have the contract or lease	State what the contract or lease is for
2.1					
	Name			, , , , , , , , , , , , , , , , , , ,	_
	Number	Street			_
anconsol-	City	and strong who expenses accounts	State	ZIP Code	
2.2					The second secon
	Name				
	Number	Street			_
zi=wczjoso	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
ownerskip	City		State	ZIP Code	_
2.4					The state of the s
	Name				_
	Number	Street	*****		_
namon migra	City	expensive department of the partment of the pa	State	ZIP Code	_
2.5					
- Commont	Name				_
	Number	Street			_
	City		State	ZIP Code	-

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Т	if	fa	n	v
٠,				_

Debtor 1

Bello

Case number (if known) 20-13688-amc

	A	dditional Pa	ige if You H	ave More Contracts or Leas	es
	Person o	r company w	ith whom you	have the contract or lease	What the contract or lease is for
2.2					
	Name				
of Resident Williams	Number	Street			
The second second second	City	1 · · · · · · · · · · · · · · · · · · ·	State	ZIP Code	
2	Marantan of Araba est cas				
	Name				
	Number	Street			
and the second s	City	***************************************	State	ZIP Code	
2	ti karangan da sana ing karangan da ka	executive results where the postments	MOREOVACE LINEAL METALIZACIONAL PROPRIEDOS COME	enditures variantes que con establista e establista con si vidi de break dimentra e troma varian de establistad	
	Name	***************************************			
and the second s	Number	Street			
	City	ALL CONTRACTOR OF THE PARTY OF	State	ZIP Code	
2			No area was a second and a second a second and a second a		
	Name		***************************************		_
	Number	Street			
	City		State	ZIP Code	
2	Shalle Jacons ages	NOR in takend can be in the techniques stage (some			
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2			MICHARISTA A Charles of weather in important and		
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2	The supplier of the supplier o		THE STREET STREET, STR		
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	Number	Street			-
	City		State	ZIP Code	

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Debtor 1	Tiffany	A.	Bello
	First Name	Middle Name	Last Name
Debtor 2	No		
(Spouse, if filing)	First Name	Middle Name	Last Name
	Pankeyston Caucht-	the: Eastern District of Pe	nnovlyonio
United States I	20-13688-am		erinsyrvania

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

	(If you are filing a joint case,		000 G.O. T.O. T.O. T.Y
☑ Yes			
Within the last 8 years, have Arizona, California, Idaho, Loui No. Go to line 3. Yes. Did your spouse, form No	siana, Nevada, New Mexico,	Puerto Rico, Texas, Wash	(Community property states and territories include ington, and Wisconsin.)
Yes. In which communit	ty state or territory did you live	e?	Fill in the name and current address of that person.
Name of your spouse, former s	spouse, or legal equivalent		
Number Street			
200			
City	State	ZIP Code	
Ochedale D (Official FOITH 100	to fill out Column 2.	orm 106E/F), or Scheduk	e G (Official Form 106G). Use Schedule D,
Column 1: Your codebtor	to fill out Column 2.	orm 106E/F), or Scheduk	e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the deb Check all schedules that apply:
Schedule E/F, or Schedule Gr Column 1: Your codebtor Vincent Bello, IV	to fill out Column 2.	orm 106E/F), or Scheduk	e G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the deb Check all schedules that apply:
Schedule E/F, or Schedule Gr Column 1: Your codebtor Vincent Bello, IV Name 69 West Amosland Roa	to fill out Column 2.	orm 106E/F), or Scheduk	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line
Schedule E/F, or Schedule Grand 1: Your codebtor Vincent Bello, IV Name 69 West Amosland Roan Number Street	ad		Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line
Schedule E/F, or Schedule Grand 1: Your codebtor Vincent Bello, IV Name 69 West Amosland Roa	ad PA	19074	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line
Schedule E/F, or Schedule Grand 1: Your codebtor Vincent Bello, IV Name 69 West Amosland Roa Number Street Norwood	ad		Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line
Schedule E/F, or Schedule Grand 1: Your codebtor Vincent Bello, IV Name 69 West Amosland Roa Number Street Norwood	ad PA	19074	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Schedule E/F, or Schedule Grand Column 1: Your codebtor Vincent Bello, IV Name 69 West Amosland Roan Number Street Norwood City Name	ad PA	19074	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line
Schedule E/F, or Schedule Grand 1: Your codebtor Vincent Bello, IV Name 69 West Amosland Roa Number Street Norwood City	ad PA	19074	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Schedule E/F, or Schedule Grand Schedule E/F, or Schedule Grand Sc	ad PA	19074	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line Schedule E/F, line
Schedule E/F, or Schedule G Schedule E/F, or Schedule G Schedule E/F, or Schedule G Schedule G Schedule E/F, or Schedule E/F, or Schedule G Schedule E/F, or Schedule E	ad PA State	19074 ZIP Code	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line
Schedule E/F, or Schedule G Schedule E/F, or Schedule G Schedule E/F, or Schedule G Schedule G Schedule E/F, or Schedule G Schedule G Schedule E/F, or Schedule G Sch	ad PA State	19074 ZIP Code	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule D, line Schedule D, line
Schedule E/F, or Schedule G Schedule E/F, or Schedule G Schedule E/F, or Schedule G Schedule G Schedule E/F, or Schedule G Schedule G Schedule E/F, or Schedule G Schedul	ad PA State	19074 ZIP Code	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule G, line Schedule E/F, line Schedule G, line Schedule G, line Schedule E/F, line
Schedule E/F, or Schedule Grand 1: Your codebtor Vincent Bello, IV Name 69 West Amosland Roan Number Street Norwood City Name Number Street Norwood City	ad PA State	19074 ZIP Code	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule D, line Schedule D, line

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Deb		First Name Middle Name	Last Name	 1	Case number (if known) 20-13688-amc
		Additional Page to List Mo	re Codebtors		
Section 2 Committee of the Committee of	Column	1: Your codebtor			Column 2: The creditor to whom you owe the deb
3					Check all schedules that apply:
	Name				Schedule D, line
					☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
3					
	Name		**************************************		Schedule D, line
	-				☐ Schedule E/F, line
	Number	Street			Schedule G, line
	City		State	ZIP Code	
3	Name	· · · · · · · · · · · · · · · · · · ·			Schedule D, line
	rano				☐ Schedule E/F, line
	Number	Street			☐ Schedule G, line
	City		State	ZIP Code	
3			**************************************		
	Name				Schedule D, line
					☐ Schedule E/F, line
	Number	Street			Schedule G, line
. 1	City		State	ZIP Code	
3					Schedule D, line
	Name				Schedule E/F, line
	Number	Street			□ Schedule G, line
	City		State	ZIP Code	_
3				ZII OOG	
	Name				Schedule D, line
	200 D L D				Schedule E/F, line
	Number	Street			─ Schedule G, line
7	City		State	ZIP Code	
-	Name		23.245-242		Schedule D, line
					☐ Schedule E/F, line
	Number	Street		-	Schedule G, line
	City		State	ZIP Code	_
	Name	D. W. St. St. St.	The second secon	A	Schedule D, line
	S. Company of the Com				☐ Schedule E/F, line
	Number	Street			─ Schedule G. line

City

ZIP Code

State

Fill in this information to identify	y your case:				
Debtor 1 Tiffany	A.	Bello			
First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the	: Eastern District of Pennsy	rlvania			
Case number 20-13688-amc					
(If known)		-	1	Check if this is:	
		PROCESSION OF THE PROCESSION O		☐ An amended filing☐ A supplement showing postpetition	on obontor 12
				income as of the following date:	Jii chapter 13
Official Form 106I	_			MM / DD / YYYY	
Schedule I: You	ur Income				12/15
f you are separated and your spo	ou are married and not to buse is not filing with you, e top of any additional pa	ling jointly, and you	our spouse is livi	and Debtor 2), both are equally respo ing with you, include information abo your spouse. If more space is needed mber (if known). Answer every questi	out your spouse.
Fill in your employment information.		Debtor 1		Debtor 2 or non-filing s	pouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employ	yed	☐ Employed ☐ Not employed	minimiphoning collection and an electromy developed and a supplication of the supplica
Include part-time, seasonal, or self-employed work.		Customer Se	antioo		
Occupation may include student or homemaker, if it applies.	Occupation	Customer Se	ervice		Michigan Service
	Employer's name	W. W. Grain	ger		
	Employer's address	1530 Delmar	- Data-		
	projet o dadroos	Number Street	Drive	Number Street	
		Folcroft	PA 1	9032 City State	710.0-4-
	How long employed the	•	Otate Zir Code	e City State	ZIP Code
	now long employed the	re /	er .		
Part 2: Give Details About	Monthly Income				
spouse unless you are separated	ave more than one emplove	er combine the info		ny line, write \$0 in the space. Include you ployers for that person on the lines	ur non-filing
2001. Il you need more space, a	macii a separate sheet to th	115 101111.	For Deb		
List monthly gross wages, sale deductions). If not paid monthly,	ary, and commissions (be calculate what the monthly	efore all payroll wage would be.	2.	non-filing spouse	
3. Estimate and list monthly over			3. +\$	\$ + \$	
4. Calculate gross income. Add lii					

Debtor 1 Tiffany A. Bello Case number (if known) 20-13688-amc

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$	\$	
5 List all neveral deductions				
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$		
5b. Mandatory contributions for retirement plans	5b.	\$	\$	
5c. Voluntary contributions for retirement plans	5c.	\$	\$	
5d. Required repayments of retirement fund loans	5d.	\$. \$	
5e. Insurance	5e.	\$	\$	
5f. Domestic support obligations	5f.	\$	\$	
5g. Union dues	5g.	\$	\$	
5h. Other deductions. Specify:	5h.	+\$	+ \$	
6. Add the payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	. 6.	\$	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$	
8. List all other income regularly received:				
 Net income from rental property and from operating a business, profession, or farm 				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$	
8b. Interest and dividends	8b.	\$	\$	
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	ent			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	
8d. Unemployment compensation	8d.	\$	\$	
8e. Social Security	8e.	\$	\$	
8f. Other government assistance that you regularly receive				
Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		0		
Specify:	8f.	\$	\$	
8g. Pension or retirement income	8g.	\$	\$	
8h. Other monthly income. Specify: workers compensation	8h.	+\$ 2,996.00	+\$	
9. Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$2,996.00	\$	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,996.00	+ s= s_	2,996.00
11. State all other regular contributions to the expenses that you list in Sche	dule J	<i>l</i> .		
Include contributions from an unmarried partner, members of your household, friends or relatives.	your d	ependents, your roo	ommates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are	not a	vailable to pay expe	nses listed in Schedule J.	
Specify:			11. + \$	
12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain				2,996.00
				nbined
13. Do you expect an increase or decrease within the year after you file this No.	form?	•	mor	nthly income
Yes. Explain:				

	Fill in this i	nformation to identify	your case:				
	Debtor 1	Tiffany First Name	A. Bello Middle Name Last Name	Check if	this is		
	Debtor 2		Edst Maine			EU:	
	(Spouse, if filing	I) First Name	Middle Name Last Name	An ar		•	petition chapter 13
	United States	Bankruptcy Court for the:	Eastern District of Pennsylvania			of the following	
	Case number	20-13688-amc			DD / YYY		• • • • • • • • • • • • • • • • • • • •
(Official	Form 106J	·				
-	Sched	dule J: You	ur Expenses				12/15
ir	nformation.	ete and accurate as po If more space is neede nswer every question.	ossible. If two married people are filed, attach another sheet to this form	ing together, both are equally n. On the top of any additiona	respons I pages,	ible for supply write your nam	ing correct e and case number
F	Part 1:	Describe Your Hou	sehold				
1.	Is this a joi	nt case?					
	No. Go	o to line 2. Des Debtor 2 live in a s	eparate household?				
		No					
		Yes. Debtor 2 must file	e Official Form 106J-2, Expenses for S	Separate Household of Debtor 2			
2.	Do you hav	/e dependents?	□ No	Demandently relative to the			
	Do not list I Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	and the same of th	Dependent's age	Does dependent live with you?
	Do not state names.	e the dependents'		Daughter		19	☐ No ☑ Yes
				Daughter		11	□ No
							Yes
							☐ No ☐ Yes
							☐ No
							Yes
							□ No
					-		☐ Yes
3.	expenses of	penses include of people other than of your dependents?	☑ No □ Yes				
Pa	art 2: Es	stimate Your Ongoin	ng Monthly Expenses				
E			bankruptcy filing date unless you a	are using this form as a suppl	ement in	a Chapter 13 c	ase to report
e)		of a date after the bani	kruptcy is filed. If this is a supplem				
In	clude exper	ses paid for with non-	-cash government assistance if you	know the value of			
SI	uch assistar	ice and have included	it on Schedule I: Your Income (Offi	cial Form 106l.)		Your expen	nses
4.		or home ownership ex r the ground or lot.	kpenses for your residence. Include	first mortgage payments and	4.	\$	1,300.00
	If not inclu	uded in line 4:					
	4a. Real	estate taxes			4a.	\$	
	4b. Prope	erty, homeowner's, or re	nter's insurance		4b.	\$	
	4c. Home	e maintenance, repair, a	nd upkeep expenses		4c.	\$	
	4d. Home	eowner's association or	condominium dues		4d.	\$	

Debtor 1 Tiffany A. Bello Case number (if known) 20-13688-amc

			Your expenses
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$
6	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$ 160.00
	6b. Water, sewer, garbage collection	6b.	\$ 70.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$\$306.00
	6d. Other. Specify:	6d.	\$
7.		7.	\$ 700.00
8.	Childcare and children's education costs		
9.		8.	\$
10.	Personal care products and services	9.	\$ \$ 100.00
11.	Medical and dental expenses	10.	
12.		11.	\$200.00
14.	Do not include car payments.	12.	\$310.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	
15.		14.	\$
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$90.00
	15d. Other insurance. Specify:	15d.	\$
16.	Taxos Do not include toxos deducted for		· ·
10.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:		\$
17		16.	Ψ
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		Ψ
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes		
	20c. Property, homeowner's, or renter's insurance	20b.	\$
	20d. Maintenance, repair, and upkeep expenses	20c.	\$
	20e. Homeowner's association or condominium dues	20d.	\$
		20e.	\$

Debtor 1	Tiffany A. Bello C	ase number (if known)_20-13688-amc
1. Other.	Specify:	21. +\$
. Calcula	te your monthly expenses.	
22a. Add	d lines 4 through 21.	22a. \$ 3,076.00
22b. Co	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b. \$
22c. Add	d line 22a and 22b. The result is your monthly expenses.	22c. \$3,076.00
Calculate	your monthly net income.	
23a. Co	py line 12 (your combined monthly income) from Schedule I.	23a. \$2,996.00
23b. Co	py your monthly expenses from line 22c above.	^{23b.} -\$ 3,076.00
23c. Sul	btract your monthly expenses from your monthly income.	
The	e result is your monthly net income.	23c. \$0.00
	xpect an increase or decrease in your expenses within the year after you file	
mortgage	ple, do you expect to finish paying for your car loan within the year or do you expec payment to increase or decrease because of a modification to the terms of your mo	xt your ortgage?
No.		
Yes.	Explain here:	